

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 17, 2001 8:00 am
Secretary of State

09-17-2001 90153 002 ***550.00

DOCUMENT # P99000109754

1. Entity Name
JKR SALES, INC.

Principal Place of Business

**709 IXORIA AVENUE
 FORT PIERCE FL 33482**

Mailing Address

**709 IXORIA AVENUE
 FORT PIERCE FL 33482**

2. Principal Place of Business

681 FOX CREEK CT

3. Mailing Address

681 FOX CREEK CT

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

WESTON FL

City & State

WESTON FL

4. FEI Number

65-0967636

Applied For

Not Applicable

Zip

33327

Country

USA

Zip

33327

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**BRASISKIS, THOMAS
 709 IXORIA AVENUE
 FORT PIERCE FL 33482**

7. Name and Address of New Registered Agent

Name **BRASISKIS, THOMAS**

Street Address (P.O. Box Number is Not Acceptable)

681 FOX CREEK CT

City

WESTON

FL

Zip Code

33327

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Thomas P. Brasiskis
 THOMAS P. BRASISKIS

Thomas P. Brasiskis
 (NOTE: Registered Agent signature required when reinstating)

9/12/01
 DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so. ☐
 (See criteria on back)

FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **PRESIDENT** ☐ Delete
 NAME **THOMAS P. BRASISKIS**
 STREET ADDRESS **681 FOX CREEK CT**
 CITY-ST-ZIP **WESTON, FL 33327**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ Change ☐ Addition
 NAME **THOMAS P. BRASISKIS**
 STREET ADDRESS **681 FOX CREEK CT**
 CITY-ST-ZIP **WESTON, FL 33327**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Thomas P. Brasiskis
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/12/01

561-373-4925

Date

Daytime Phone #

CRP 09-04 (5/01)